Effective October 1, 2003

Application or Docket Number

7												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR		THAN ENTITY
TOTAL CLAIMS			21		·			RATE	FEE	7	RATE	FEE'
FOR .			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	E 385.00	OR.	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			2) minus 20=		•]	X\$ 9=		OR	X\$18=	13
INDEPENDENT CLAIMS			5 minus 3 =		・			X43=	†	OR	X86=	172
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT					+145=	 	1		116
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	 	OR	+290=	0/0
1-20-06 CLAIMS AS AMENDED - PART II OTHER										960 THAN		
<u>L</u>	10	(Column 1)		(Colun	าก 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 21	Minus	-2		=]	X\$ 9 <i>≓</i>		OR	X\$18=	
AME	Independent	• G	Minus	BENDENT	CI AIN	=/	! [X43=		ÓR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							, [+145=		OR	+290=/	
1 12 13 19 21								TOTAL		OR ,	TOTAL	
(Column 1) (Column 2) (Column 3)										ODIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=]. [X\$ 9=		OR	X\$18=	
	Independent	•	Mirius	•••		=		X43= ·		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM		1	+145=		OR	+290=	
								TOTAL DDIT, FEE	·	OR A	TOTAL DDIT, FEE	
<u>.</u>		(Column 1)		(Cotumi		(Column 3)				•		
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• '	Minus	**		=		X\$ 9≈		OR	X\$18=	
	Independent	•	Minus	***		=	┢	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OP TOTAL OR **TOTAL												
11	the "Highest Nun	nber Previously Pai her Previously Paid her Previously Paid	d For IN THIS	S SPACE is A	ess than	3 enter "3" .	~	DIT. FEE	J		DOTT. FEE	
014	•				•							